

SERFF Tracking Number: MNNP-126494315 State: Arkansas
Filing Company: ReliaStar Life Insurance Company State Tracking Number: 45054
Company Tracking Number: 2009 L & R
TOI: LTC05I Individual Long Term Care - Nursing Sub-TOI: LTC05I.003 Other
Home & Home Health Care
Product Name: LTC L & R Reports
Project Name/Number: /

Filing at a Glance

Company: ReliaStar Life Insurance Company

Product Name: LTC L & R Reports

TOI: LTC05I Individual Long Term Care -

Nursing Home & Home Health Care

Sub-TOI: LTC05I.003 Other

Filing Type: Form

SERFF Tr Num: MNNP-126494315 State: Arkansas

SERFF Status: Closed-Filed

State Tr Num: 45054

Co Tr Num: 2009 L & R

State Status: Closed

Reviewer(s): Harris Shearer

Author: Molly Williams

Disposition Date: 04/01/2010

Date Submitted: 03/01/2010

Disposition Status: Filed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Not Filed

Project Number:

Date Approved in Domicile:

Requested Filing Mode:

Domicile Status Comments: n/a

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Group Market Size:

Overall Rate Impact:

Group Market Type:

Filing Status Changed: 04/01/2010

Explanation for Other Group Market Type:

State Status Changed: 04/01/2010

Deemer Date:

Created By: Molly Williams

Submitted By: Molly Williams

Corresponding Filing Tracking Number:

Filing Description:

Long Term Care Lapses and Replacement Report for 2009

Company and Contact

Filing Contact Information

Molly Williams, Compliance Analyst

molly.williams@us.ing.com

P.O. Box 20

612-342-7233 [Phone]

Route 7791

612-342-3695 [FAX]

Minneapolis, MN 55440-0020

SERFF Tracking Number: MNNP-126494315 State: Arkansas
 Filing Company: ReliaStar Life Insurance Company State Tracking Number: 45054
 Company Tracking Number: 2009 L & R
 TOI: LTC051 Individual Long Term Care - Nursing Sub-TOI: LTC051.003 Other
 Home & Home Health Care
 Product Name: LTC L & R Reports
 Project Name/Number: /

Filing Company Information

| | | |
|----------------------------------|-------------------------|------------------------------|
| ReliaStar Life Insurance Company | CoCode: 67105 | State of Domicile: Minnesota |
| P.O. Box 20 | Group Code: 229 | Company Type: |
| Minneapolis, MN 55440-0020 | Group Name: | State ID Number: |
| (612) 372-5246 ext. [Phone] | FEIN Number: 41-0451140 | |

Filing Fees

Fee Required? No
 Retaliatory? No
 Fee Explanation:
 Per Company: No

| COMPANY | AMOUNT | DATE PROCESSED | TRANSACTION # |
|----------------------------------|--------|----------------|---------------|
| ReliaStar Life Insurance Company | \$0.00 | 03/01/2010 | |

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Home & Home Health Care
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Correspondence Summary

Dispositions

| Status | Created By | Created On | Date Submitted |
|--------|----------------|------------|----------------|
| Filed | Harris Shearer | 04/01/2010 | 04/01/2010 |

| | | | |
|---------------------------------|---|-------------------------------|-------------------------|
| <i>SERFF Tracking Number:</i> | <i>MNNP-126494315</i> | <i>State:</i> | <i>Arkansas</i> |
| <i>Filing Company:</i> | <i>ReliaStar Life Insurance Company</i> | <i>State Tracking Number:</i> | <i>45054</i> |
| <i>Company Tracking Number:</i> | <i>2009 L & R</i> | | |
| <i>TOI:</i> | <i>LTC05I Individual Long Term Care - Nursing</i> | <i>Sub-TOI:</i> | <i>LTC05I.003 Other</i> |
| | <i>Home & Home Health Care</i> | | |
| <i>Product Name:</i> | <i>LTC L & R Reports</i> | | |
| <i>Project Name/Number:</i> | <i>/</i> | | |

Disposition

Disposition Date: 04/01/2010

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: MNNP-126494315 State: Arkansas

Filing Company: ReliaStar Life Insurance Company State Tracking Number: 45054

Company Tracking Number: 2009 L & R

TOI: LTC051 Individual Long Term Care - Nursing Sub-TOI: LTC051.003 Other
Home & Home Health Care

Product Name: LTC L & R Reports

Project Name/Number: /

| Schedule | Schedule Item | Schedule Item Status | Public Access |
|---------------------|----------------------------------|----------------------|---------------|
| Supporting Document | Flesch Certification | | No |
| Supporting Document | Application | | No |
| Supporting Document | Health - Actuarial Justification | | No |
| Supporting Document | Outline of Coverage | | No |
| Supporting Document | Cover Letter | | Yes |
| Supporting Document | LTC Lapse & Replacement Report | | Yes |

SERFF Tracking Number: MNNP-126494315 State: Arkansas
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 Company Tracking Number: 2009 L & R
 TOI: LTC051 Individual Long Term Care - Nursing Sub-TOI: LTC051.003 Other
 Home & Home Health Care
 Product Name: LTC L & R Reports
 Project Name/Number: /

Supporting Document Schedules

| | Item Status: | Status Date: |
|--|--------------|--------------|
| Bypassed - Item: Flesch Certification Bypass Reason: report filing only Comments: | | |
| Bypassed - Item: Application Bypass Reason: report filing only Comments: | | |
| Bypassed - Item: Health - Actuarial Justification Bypass Reason: report filing only Comments: | | |
| Bypassed - Item: Outline of Coverage Bypass Reason: report filing only Comments: | | |
| Satisfied - Item: Cover Letter Comments: see attached Attachment: AR L & R Ltr 2009.pdf | | |

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Home & Home Health Care
Product Name: LTC L & R Reports
Project Name/Number: /

Item Status:

**Status
Date:**

Satisfied - Item: LTC Lapse & Replacement Report

Comments:

see attached

Attachment:

AR 2009 Lapses and Replacements.pdf

ReliaStar Life Insurance Company

20 Washington Avenue South

Minneapolis, MN 55401

Tel.: 612.342-7233

Toll Free: 1-800-537-5024 X 342-7233

Fax: 612.342.3695

Email: molly.williams@us.ing.com

Molly Williams

Compliance Analyst

March 1, 2010

Arkansas Insurance Department

Compliance - Life and Health Division

1200 West Third Street

Little Rock, Arkansas 72201-1904

RE: Lapse and Replacement Report Long-Term Care Insurance Policies or Certificates
ReliaStar Life Insurance Company
NAIC #67105

Attached is a copy of the completed Lapse and Replacement Report for 2009.

If you have any questions, I can be reached at the number listed above.

Very truly yours,

A handwritten signature in black ink, appearing to read 'Molly Williams', with a long horizontal flourish extending to the right.

Molly Williams

/maw

Long-Term Care Information
Replacement and Lapse Reporting Form

For the state of: **ARKANSAS**

For the Reporting Year of 2009

| | | |
|------------------|--|-------------------------------------|
| Company Name: | <u>ReliaStar Life Insurance Company</u> | Due: <u>June 30 annually</u> |
| Company Address: | <u>20 Washington Ave South Minneapolis, MN 55401</u> | Company NAIC Number: <u>67105</u> |
| Contact Person: | <u>Molly Williams</u> | Phone Number: <u>(612) 342-7233</u> |
| | | |

Instructions

The purpose of this form is to report on a statewide basis information regarding long-term care insurance policy replacements and lapses. Specifically, every insurer shall maintain records for each agent on that agent's amount of long-term care insurance replacement sales as a percent of the agent's total annual sales and the amount lapses of long-term care insurance policies sold by the agent as a percent of the agent's total annual sales. The tables below should be used to report the ten percent (10%) of the insurer's agent with the greatest percentage of replacements and lapses.

Listing of the 10% of Agents with the Greatest Percentage of Replacements

| Agent's Name | Number of Policies Sold by this Agent | Number of Policies Replaced By This Agent | Number of Replacements As % of the Number Sold By this Agent |
|--------------|---------------------------------------|---|--|
| None | 0 | 0 | n/a |

Listing of the 10% of Agents with the Greatest Percentage of Lapses

| Agent's Name | Number of Policies Sold by this Agent | Number of Policies Lapsed By This Agent | Number of Lapses As % of Number Sold By this Agent |
|------------------------|---------------------------------------|---|--|
| Louis Pantalone | 0 | 9 | n/a |

Company Tools

Percentage of Replacement Policies Sold to Total Annual Sales 0 %

Percentage of Replacement Policies Sold to Policies in Force (as of the end of the preceding calendar year) 0 %

Percentage of Lapsed Policies to Total Annual Sales n/a %

Percentage of Lapsed Policies to Policies in Force (as of the end of the preceding calendar year) 17 %